



Illinois Department of Financial and Professional Regulation

Division of Professional Regulation

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Governor

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Acting Director
Division of Professional Regulation

**Department of Financial and Professional Regulation
Division of Professional Regulation
Collaborative Pharmaceutical Task Force Advisory Board Meeting**

Date: February 18, 2020
Meeting Convened: 1:30 P.M.
Meeting Adjourned: 3:23 P.M.
Location: Chicago: JRTC CBD Rooms 2-025; SPI: Stratton CBD 376

Roll Call: Philip P. Burgess, MBA, DPh, RPh, Chairperson
Hunter Wiggins, General Counsel, Department of Financial & Professional
Regulation

Helga Brake, PharmD
Scott A. Reimers, (Springfield)
Scott Meyers, MS, PPh
Adam Bursua, PharmD
Lemrey Al Carter, RPh
Garth Reynolds, RPh (Springfield)
Jerry L. Bauman, PharmD
Rob Karr (Springfield)
Jayna Brown

Staff Present: Munaza Aman, Associate General Counsel, IDFPR

Guests Present: John Long, CVS Health
Margaret Ward, Teamsters Local 727
Ryan McCann, Jewel Osco
Melissa Senatore, Teamsters 727
Joel Baise, Walgreens
Yagnesh Patel, CVS Health
Denise Scarpelli, University of Chicago
Gail Fisherkeller, Schnucks
Tim Ortman, UIC

Topic	Discussion	Action
Roll Call & Introductions	<ul style="list-style-type: none"> • Chairman Philip P. Burgess opened the meeting and explained that the taskforce was originally convened in 2018 and 2019 to provide guidance to our legislators. The legislators requested that the task force continue and added six new members including those representing organized labor, retail pharmacy operations, and legislators themselves. Going from 11 members to 17 members. The main body of the meeting will limit discussion to taskforce members, but the floor will be opened at the end for public comments. • After opening, the members and attendees proceeded to introduce themselves. 	
Meeting Dates	<p>A. <u>Meeting Dates</u></p> <ul style="list-style-type: none"> • The first order of business is to determine future meeting dates. When the group first convened this task force, it discussed these meetings being on Tuesdays. However, Tuesdays are too difficult for the legislators. The afternoon of March 10 already has a meeting room reserved. • The March 10 date was unanimously approved. • April 20 was a second date pending the time. • The taskforce then began discussing potential proxy voting procedures due to difficulty on finding meeting dates that worked for every member. • The Chairman explained that May will be a difficult month to meet because of the legislators being in session the entire month. May 4 and 11 have been proposed as a potential date because there is no session that day. • May 11 was determined to be the best date and was approved unanimously. • June 16 was also approved unanimously. • The Chairman then proposed that the taskforce establish quorum rules now prior to the other meetings. It will have 14 voting members, so the quorum will be 8. However, since the Senate members have not yet been appointed, it currently has 12 voting members, so the current quorum is 7. • Quorum procedure was approved unanimously. 	
Discussion Topics	<p>A. <u>Overview of Previous Task Force Accomplishments</u></p> <ul style="list-style-type: none"> • The Chairman provided a highlight of some of the recommendations the previous task force made including: Strong whistle blower protections, technician training, breaks, prohibition of shifts greater than 12 hours, limitations on advertising, prohibition on production quotas, as well as several others. <p>B. CQI</p> <ul style="list-style-type: none"> • One recommendation to discuss that was not incorporated: Requirement of CQI program original taskforce unanimously supported it; however, legislators did not incorporate because there was not enough of a consensus with other stakeholders, and it was thought to be beneficial to hold off on the controversial issues until a later date. • Helga: explained that this group was supportive of CQI, and without a CQI requirement patient safety continues to be at risk. I hope to be able to revisit this issue and cure any controversial elements. 	

	<ul style="list-style-type: none"> • Phil: Is there a sense of where are the potential issues regarding this and how we may potentially address these. • Garth: The opposition was from the Trial Lawyers Association and their long-time stance against this CQI practice. • Rob: I don't speak for the Trial Lawyers. It is a philosophical difference. They want out right error reporting. We view that as counterproductive for resolving errors. • The group agreed that this is an issue that the taskforce must revisit. • Scott M: The only way that this ever gets taken care of is by facing the Trial Lawyers head on. Pharmacy needs to have a similar protection as the Medical Studies Act. It is time for the public to see why this program is not being implemented. There does not appear to be a compromise in sight. • Phil: The task force gives recommendations to the legislators. Is there a middle ground on this issue? • Rob: I think we would have to engage in conversation with them separate from the Task Force to see if there is a middle ground. I don't think it is our charge to negotiate. • Jayna: Without any direction on which way to go, changing the language is like throwing darts. Trying to find middle ground when there may not be one. Why not recommend the language again. • Rob: I think the Task Force was reconvened to make additional recommendation from what was made before. • Department: Our impression is that the Task Force is a continuation of the old Task Force and can reiterate those issue and consider additional issues. • A vote was then taken to reintegrate the same CQI language as the previous Task Force. <ul style="list-style-type: none"> ○ Ayes: Philip P. Burgess, Helga Brake, Scott Meyers, Adam Bursua, Lemrey Al Carter, Garth Reynolds, Rob Karr, Jayna Brown ○ Nays: ○ Abstains: Scott A. Reimers <p>C. Patient Care Services</p> <ul style="list-style-type: none"> • The Task Force discussed potentially working on the topic of patient care services. Some members believed that the taskforce should work on recommendations regarding patient care services. However, it was determined by a majority of the Task Force that this topic was more appropriate for the Department of Insurance and Department of Health and Family Services, and that the Task Force should not make recommendations without the help of the other agencies. • A vote was then taken to invite Department of Insurance and Department of Health and Family Services to the April meeting to discuss patient care services. <ul style="list-style-type: none"> ○ Ayes: Philip P. Burgess, Helga Brake, Scott Meyers, Lemrey Al Carter, Garth Reynolds, Rob Karr, Scott A. Reimers, Jayna Brown ○ Nays: ○ Abstains: <p>D. Meal Breaks</p>	<p>Motion Passed</p> <p>Motion Passed</p> <p>Motion Passed</p>
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	<ul style="list-style-type: none"> ○ Ayes: Philip P. Burgess, Helga Brake, Scott Meyers, Lemrey Al Carter, Garth Reynolds, Rob Karr, Scott A. Reimers ○ Nays: Jayna Brown ○ Abstains: <p>K. Next Steps</p> <ul style="list-style-type: none"> ● March Meeting: <ul style="list-style-type: none"> ○ Determine specific questions to pose to Department of Insurance and Department of Health and Family Services. ○ Discussing specific language regarding issues surrounding meal breaks will be discussed. ○ Discussing language about Resident exemption. ○ Looking at services beyond dispensing. ○ Extending refill limits from 15 months to 24 months ● A vote was taken to nominate Lemrey Al Carter as Chairman. <ul style="list-style-type: none"> ○ Ayes: Philip P. Burgess, Helga Brake, Scott Meyers, Adam Bursua, Lemrey Al Carter, Garth Reynolds, Rob Karr, Scott A. Reimers, Jayna Brown ○ Nays: ○ Abstains: ● Al Carter was elected as Vice Chairman <p>L. Public Comment</p> <ul style="list-style-type: none"> ● There was no public comment. 	Motion Passed
Adjournment	<ul style="list-style-type: none"> ● Adjourned 3:23 p.m. 	